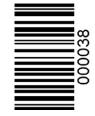


# RETIREMENT OPTIONS REQUEST AND CLAIM FORM FOR A COMPANY PENSION, AVC, PRSA AVC AND PERSONAL RETIREMENT BOND



Before you give us your personal information it is important that you know what your data protection rights are and how and why we use your personal information. This is set out in the Irish Life Data Privacy Notice which is always available on our website at https://www.irishlife.ie or you can ask us for a copy.

We need the information requested on this form to prepare your options and pay your claim.

Please read the questions carefully before answering them and use BLOCK CAPITALS. We recommend that you seek advice from your financial adviser before the completing the form and choosing your option.

Please do not return the form until all information is available.

Do you want to :-		
A) Request Retirement Options before claiming benefits?	Yes 🔵	No 🔘
If Yes, complete Sections 1 to 5		
OR		
B) Claim Retirement Benefits?	Yes 🔵	No 🔘
If yes, complete all sections and provide the required supporting documentation		
Plans Being Claimed		
Plans Being Claimed Plan numbers		

### **Checklist for Retirement Claim**

Please note that your fund value can fall as well as rise and is not guaranteed to hold. The value paid from your plan(s) will be based on unit prices on the date the final requirements are received. You may wish to protect the value of your fund while your claim is being processed by switching your fund(s) to a low risk Cash Fund. Please contact Irish Life or your Financial Adviser for further information.

Have you completed all relevant sections of the claim form, including employment details in Section 3 and details of all your other pension plans in Section 4?

#### Have you included the following with your Claim form?

- $\bullet \quad \hbox{A clear certified copy of your passport, driving licence or birth certificate} \\$
- A copy of your bank statement dated within the last 6 months. The statement should show your name, address, BIC, IBAN and statement date. There is no need to show any account transactions
- Completed application form if you are purchasing an AMRF, ARF or Annuity with Irish Life
- If you are investing in an ARF or taking taxable cash, proof of guaranteed income of €12,700 or proof of investment of €63,500 in an AMRF or an Annuity
- If the Normal Retirement Age (NRA) of the scheme is to change, have you provided a letter from your trustee **Or,** if DTS or ITS are the Trustees, a letter from the employer and member
- If this plan is an AVC or a PRSA AVC, a letter from the Trustees/Administrator of the main pension scheme with details of all benefits payable/paid
- If you have Defined Benefits, a letter from the Defined Benefit Scheme Administrator confirming the capital value and benefits paid or payable
- If you have total funds in excess of €2million, a copy of the Personal Fund Threshold certificate if you have one from the Revenue Commissioners

Guaranteed Income is annuity income and personal rate State Pension entitlements, e.g. State Pension (Contributory), State Pension (Non-Contributory), Christmas Bonus, Invalidity Pension, Living Alone allowance and Living on an Island allowance. Proof of income is e.g. copy payment advices, letter from administrator, Social Welfare letter, a receipt from An Post where

pension is collected.

If your marital status is divorced or separated have you completed Section 5?
 If you are investing in an AMRF, ARF or Annuity that's not with Irish Life, please request a letter, called a Willing and Able letter, from the provider you will invest with.
 If you want to allocate tax credits to Irish Life, please contact your Local Tax Office and ask them to assign credits on a cumulative basis to the appropriate Irish Life tax number.

 If you are taking taxable cash, a trivial payment or setting up an AMRF or ARF with Irish Life, the tax number is 4820009 C.
 If you are setting up an Annuity with Irish Life, the tax number is 0087900 D

#### Additional requirements for 20% Directors

- A copy of P60s or accountant's letter confirming your highest salaries from this employment for three
  consecutive years in the ten years before your retirement date (or date of leaving the company)
- If you are taking retirement benefits before Normal Retirement Age, and if you personally hold more than 1% shareholding, include a letter from the company accountant that you have severed all links with the company and disposed of your shareholding

shareholding is 1% or less, you do not need to dispose of your shareholding

If your personal

#### Final Salary Confirmation - Guidance

To ensure that maximum pension funding limits are not breached and to provide the member with the highest retirement lump sum, it is important to determine the member's highest salary in the years prior to retirement.

**For 20% Directors:** Final salary must be calculated using the average of the total PAYE earnings for any three or more consecutive years ending not earlier than 10 years before the date of retirement (or date of leaving service if earlier). Therefore 20% Directors should complete 5b) of Section 3 only.

**For Members who are not 20% Directors:** The Revenue allow 3 different ways of calculating final salary – see below. The member, with their financial adviser, can calculate the highest figure using one of the 3 options below and complete either 5a) or 5b) of Section 3 as appropriate. If the member wants Irish Life to calculate which option provides the highest salary figure, both 5a) and 5b) should be completed.

i) (a) Basic PAYE salary in any 12 month period of the five years before the date of retirement (or date of leaving service if earlier)

plus

- (b) the average of any variable PAYE payments (e.g. bonus /commission) for any three or more consecutive years ending on the last day used in (a) above.
- ii) The average of the total PAYE earnings for any three or more consecutive years ending not earlier than 10 years before the date of retirement (or date of leaving service if earlier).
- iii) The rate of basic PAYE salary at the date of retirement (or date of leaving service if earlier) or at any date within the year ending on that date plus the average of any variable PAYE payments calculated as in (i)(a) above.

	1. Financial Ad	dviser	De	etail	<b>s</b> - 0	nly	if y	/Ol	ı ha	ave	e a	Fir	ıan	cia	ıl A	dvi	ise	r		
	Financial Adviser Name																			
	Financial Adviser Code																			
	2. Member and	d Emp	oloy	/er I	Deta	ils														
We will issue the retirement lump sum	Members Name																			
to the member at this address unless we are	> Members Address																			
told otherwise																	<u></u>		<u></u>	
																<u>_</u>	<u> </u>	$\frac{\square}{\square}$	<u> </u>	
PPS Number should	Country of member residend	ce																		
contain 7 digits and 1 or 2 letters	PPS Number		/	/		7 37						,								
	Date of Birth  d d / mm / y y y y  We require evidence of age																			
	Member's contact phone nu	mbers	Home	e			Щ				М	obile					<u> </u>		<u> </u>	
	Employer's Name															<u>_</u>	<u>_</u>	Щ	<u> </u>	
	Employer's Address										Ш		Ш				$\perp$	Щ	_	
*The details we need are  the start and end dates of any breaks in PAYE earnings and part-time employment  your weekly hours of part-time employment and the equivalent full-time hours.	OR If you are taking your be  3. Have you had any break in this employment? If	ks in PAYE	earnir	ngs	Yes(		whil	le co							ployn		, plea		ick h	nere O
	4. a) What percentage shareholding does the member personally hold?																			
	b) Within the last three years of service in this employment did the member alone, or together with his or her spouse/registered civil partner and/or minor children, own or control more than 20% Yes No of the voting rights of the company?																			
	If No - Please con is available	on page 2	2. If th	ne mem																
Final salary details are required in all cases	If Yes - Please con		estion	מכו																
including where the 25% lump sum and AMRF/ARF option is selected.	> 5. Final Salary Confirmation  a) Please confirm the	member's			ıry in t	ne las	t 5 y	ears	prio	r to	retii	reme	nt o	r dat	e of l	eavi	ng tl	nis e	mpl	oyment
	Year PLUS please confirm		mber h	nad any																ayments
	over 3 consecutive y	ears. The	last ye	ear usec	I for the	ese pa	ymer	nts m	nust k	e th	e sa	me ye	ear a	s the	salar	y pro	vide	d ab	ove	
	Year	УУ	У	У	7	У	<u> </u>	У	У				<u>y</u>	У	у ју					
	Other PAYE Earning	gs €				€							€							

The Normal Retirement Age (NRA) will be between 60 and 70 as selected by the employer. If the member is taking early retirement (before NRA) they will have to leave the employment. 20% directors are also required to sever all links with the company and dispose of their shareholding.

Only required for Early Retirement claims for 20% Directors who personally hold more than 1% shareholding

All questions must be answered. If this section is incomplete it will delay your retirement claim. If you have more than one pension scheme please attach details on a separate sheet.

If your plan is an AVC, benefits can only be drawn at the same time and in the same manner as your main pension scheme. Please include all details of the benefits payable/paid under the main pension scheme below.

You should get this information from your pension scheme administrator. They will know how to calculate the capital value in line with current legislation.

Year	у у у	У		У	y !	у				У	У	У	У				
Total PAYE Earnings	€			€						€							
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OR Only For Company Plan member been provided if										yer	and		Ye	s (		N	o (
If the member is a 20% dire disposed of their sharehold If yes, please provide cor	ding in the co	ompany										nt.	Ye	s (		N	o (
Is this plan an AVC or PRS, If Yes, please enclose a le with details of all benefit:	tter from th		es/Ad	minist	rator	of the	e ma	in P	ensi	on S	Sche	me	Ye	s (		N	o (
. Other Pensio	n Bene	fits -	- Bei	nefit	Cr	ysta	allis	ati	or	ı E	ve	nt	(BC	CE)	C	ert	ifica
nformation required i	n accorda	ınce w	ith S	ectio	n 78	7R(	4) o	f th	ie 1	Гах	es (	Cor	isoli	ida	tion	Ac	t 199
<ul> <li>Have you received retiren No, please go to Section 4 b. yes, please complete the form</li> </ul>		s from a	ıny oth	ier pen	ision	arran	gem	ent(	s)?				Ye	s (		N	o (
ame of scheme (if applicable	)																
mployer name (if applicable)																	
art date with Employer	dd/	mm /	/ у у	уу		End d	ate v	vith I	Emp	loye	r	d	/	nm	/	у	у у
ension type (Company Pensic RB, Personal Pension, PRSA)	n,																
dministrator Contact Details																	
olicy number			,														
art date of policy	a a /	mm /	/ ЈУ ЈУ	у													
etirement benefits you red From Defined Contribut		oc DDD	c DDC	۸۵۵۲	Dove	anal E	Ponc	ione									
Date benefits were paid	John Scheme	;5, I KD.	3, 1 KJ	A3 01		/ m	m /	V	V	V	/						
·	ore any tax p	aid)		•	=				0								
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Retirement lump sum (bef Balance of the pension fur	d											lue t	aken	ı as a	ı taxa	able	lump
Retirement lump sum (bef Balance of the pension fur This includes amounts use sum or amount left in a ves	d to purchas	e annuit	ies, tra			AMRF	s, Al	RFs,	the	gros	ss va	iuci					
Balance of the pension fur This includes amounts use sum or amount left in a ves	d to purchas sted PRSA.	e annuit	ies, tra			AMRF	s, Al	RFs,	the	gros	ss va	iuc i					
Balance of the pension fur This includes amounts use sum or amount left in a ves From Defined Benefit So	d to purchas sted PRSA. chemes		ies, tra	nsferre		AMRF	s, Al	RFs,	the	gros	ss va	iuc (					
Balance of the pension fur This includes amounts use sum or amount left in a ves From Defined Benefit So Date benefits were paid	d to purchas sted PRSA. chemes		ies, tra	nsferre	d to	AMRF	m /	RFs,	the	у <u>у</u>	a yea						
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Balance of the pension fur This includes amounts use sum or amount left in a ves From Defined Benefit So Date benefits were paid Retirement lump sum (bef Annual pension income Capital value of the pension	d to purchassited PRSA.  chemes  ore any tax p	aid)		nsferre	ed to A	AMRF	m /	RFs,	the	у <u>у</u>	/						
Balance of the pension fur This includes amounts use sum or amount left in a vest. From Defined Benefit State Date benefits were paid Retirement lump sum (bef Annual pension income Capital value of the pension and value of AVCs (if not included). Have you any other pension	d to purchasisted PRSA.  chemes  ore any tax p  benefit  uded in the a	bove an	nounts)	d t	ed to /	/ m	m /	у у	у	у	a yea	ar			oout	to b	e take
Balance of the pension fur This includes amounts use sum or amount left in a ves From Defined Benefit Son Date benefits were paid Retirement lump sum (beformulated Annual pension income Capital value of the pension and value of AVCs (if not included). Have you any other pension No, please go to Section 4 c.	d to purchasisted PRSA.  chemes  ore any tax p  benefit  uded in the a  on arrangem	bove an	nounts)	d t	ed to /	/ m	m /	у у	у	у	a yea	ar		re al	oout	to b	
Balance of the pension fur This includes amounts use sum or amount left in a ves  From Defined Benefit So Date benefits were paid Retirement lump sum (bef Annual pension income	ore any tax posted in the action arrangement of the purchase o	bove an	nounts)	d t	ed to /	/ m	m /	у у	у	у	a yea	ar	or a	re al	pout		

Pension type (Company Pension,	
PRB, Personal Pension, PRSA)	
Administrator Contact Details	
Policy number	
Start date of policy dd / mm / y y y y	
i. From Defined Contribution Schemes, PRBs, PRSAs or Person	onal Pensions
Date benefits are due to be paid	d d / m m / y y y y
Expected retirement lump sum (before any tax)	€
Current value of the pension plan	€
ii. From Defined Benefit Schemes	
Date benefits are due to be paid	dd/mm/yyyy
Expected retirement lump sum (before any tax)	€
Expected annual pension income you will receive	€ a year
Capital value of the pension benefit	€
(required if benefits are about to be taken)	
Current value of any AVCs not included in the above amounts	€
If No, please go to Section 4 d.  If yes, please complete the following:  Date or expected date of transfer  Name of overseas pension arrangement  Administrator Contact Details  Gross Transfer Value   d. If you are 75 or over do you have any personal pensions or Preceived a retirement lump sum?  If No, please go to Section 4 e.  If yes, please complete the following:  Pension type (Personal Pension,	RSAs where you have not taken retirement benefits or Yes No
vested RAC or PRSA / vested PRSA)	
Administrator Contact Details	
Gross value on 75th birthday* €	
<ul> <li>e. Do you have a Personal Fund Threshold (PFT) Certificate issu</li> <li>If yes, and you have total funds in excess of €2 million, please provided have one from the Revenue Commissioners</li> <li>5. Pension Adjustment Order</li> </ul>	-
a) Has a Notice to Trustees been served in connection with a judicia	al seperation of this member? Yes No
b) Has a Pension Adjustment Order been issued or is in the process	s of being issued
in respect of pension benefits held on behalf of the above memb	per? Yes No
· · · · · · · · · · · · · · · · · · ·	per? Yes No nsion Adjustment Order.

You should get this information from your pension scheme administrator. They will know how to calculate the capital value in line with current legislation.

\*This is the value of the pension on your 75th birthday (or on 25 December 2016 if you were 75 before that date) before the deduction of

any chargeable excess tax. You should get this information from your pension administrator / PRSA provider.

5

issued on the pension plan.

## 6. Retirement Options (All benefits are subject to Revenue maximum limits) Part A) Retirement Lump Sum We will automatically pay a maximum retirement lump sum, (to a total maximum of €500,000), unless otherwise specified in the

Part A) Retirement Lu																										
We will automatically pay a maximu	um re	etire	ment	lun	ıp s	sum,	(to	a to	tal r	nax	imu	ım o	of €	500	0,00	)(00	un	les	s ot	her	wis	se s	pec	ifiec	l in t	he
following box: €																										
Note: The total maximum retirement lump sum is €200,000. Both of these Retirement lump sums between €20	e limit	s inc	clude	all r	etir	reme	nt lu	ımp	sun	ns f	rom	all:	sou	rce	s ta	ker	sin								iren	ien
Please complete your bank details be directly to your bank account. Bank dated within the last 6 months.	Αссοι	unt (	detai	ls pr	ovi	ded i	mus	t be	in y	oui	r na	me.	Ple	eas	e e	ncl	ose	a c	сор	y o	of a	ba	nk	state		
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Bank Identifier Code (BIC)																										
IBAN																										
(Account Numbe	er)																									
Part B) Retirement Op	tio	ns	- B	ala	ın	ce	of	fu	nd																	
Indicate what you want to do w											yme	ent	of	the	re	tire	me	nt	lun	np	su	m)	by	tick	ing	the
required option:																										
OPTIONS													A	\D[	OITI	ON	IAL	RE	QU	IIRI	ΕM	EN	TS			
Option 1) Buy a guaranteed pensi	DPTIONS ADDITIONAL REQUIREMENTS  Option 1) Buy a guaranteed pension income for life (Annuity) with Irish Life Annuity Proposal Form																									
Option 2) Invest in an ARF/AMRF with Irish Life  ARF/AMRF Application Form																										
Option 3) If you have a PRSA AVC invested as a vested PRS will need to select anoth	Ā to a	age	75. V	Vhe	n y	ou ap	opro	ach	n age	e 75	, yc	ou	(	$\supset$												
Option 4) Taxable Cash: pay the ba	alance	e su	bject	to i	nco	ome t	ax (	rest	tricti	ons	ар	ply)		<u> </u>	inv pe	est nsic	mer on ir	nt C	DR e me	evic for	den life	ce of	of go €12	Annı Jarai 1,700 emei	ntee a y	
Option 5) Trivial Pension: Pay the late are 2 ways that a i) If the balance of your less than €20,000 or ii) If your pension fund per annum before pa can be paid subject to See Taxation Note below explaining	Trivial r pens from a symen o 10%	l Per sion all so at of 6 no	nsion func ource the r	may ls from es for etire unda	y be om or th	e pay ALL nis en	/ablo sou nplo	e. rces	s afte	er p	ayn es ne	ot b	uy a	а ре	ensi	on	mor	e t	han	<b>.€</b> 3	30					)
Option 6) Purchase an Annuity	) ,	or A	RF/	٩MF	RF		w	ith a	anot	her	r pro	ovic	ler													
(if more than one provi			-			letail					•															
Please send my remaining fund after	er pay	yme	nt of	the	ret	irem	ent	lum	ıp sı	um	to:															
Insurance Company or QFM Name	,																									
	(pa	ayee	)																							
Address										L	L												_			
Contact Name																								$\perp$		
Policy or Reference Number (if ava	ilable	e)																								
A Willing & Able letter will be requir	ed fro	om t	he re	ceiv	ing	Insu	ıranı	ce C	Com	pan	ıy oı	r QF	M													
TAXATION NOTE: Retirement Options 1, 2, 3 Income tax, PRSI and the Universal Retirement Options 4 & 5 i) wil are allocated to Irish Life under tax	ll incu	ır ar	imn	nedi	ate	tax l	iabi	lity.	Irish	n Lit	fe v	vill c	ded	uct	tax	at	the	hig	ghei	r ra	ite i					
this. If tax credits are not allocated deducted tax. You may apply to Re If you have contacted Revenue	at the	e tim	ne of r any	rece ove	eivi er d	ng th ledu	nis fo	orm I tax	, Iris k at t	h L he	ife o	will	not	t be	in	ар										
Retirement Option 5 ii) will incu	r a tax	x lial	oility	of 1	0%	. Th	is ta	ıx is	nor	ı re	fun	dab	le,	SO Y	you	cai	nno	t a	pply	/tc	Re	eve	nue	for	a tax	(

Destination unless otherwise stated

refund at the end of the tax year.

## 7. Company Pension/AVC Trustee Authorisation

Complete for all company pension and AVC plans, unless ITS or DTS act as trustee. This section is not required for PRSA AVC only plans or for Personal Retirement Bonds.

I confirm that where the scheme rules do not already include an appropriate rule, the scheme rules are hereby endorsed to allow the member to opt for the ARF/AMRF option in accordance with section 772 of the Taxes Consolidation Act 1997, as amended.

I hereby declare that I, being the TRUSTEE of the scheme as named on this form, am legally entitled to claim the amount payable as indicated in this form and authorise that the payment of the retirement lump sum and any remaining fund should be paid as selected by the member. I confirm that when all the assets of the scheme have been disposed in accordance with the Rules, the scheme shall then be deemed to be terminated.

	raics, the serieme shall then be	decined to be terminated.
	> Signature of Trustee *	X
Please sign and date		Signature of person duly authorised to sign for and on behalf of the Trustee
	Name in BLOCK CAPITALS	
	Position in company	
	Date	d d / mm / y y y y

## 8. Member/Contributor Declaration (to be completed in all cases)

I hereby instruct the Trustees that benefits should be paid in the way selected on my ceasing to be a member of this company pension and / or AVC scheme. I understand that by completing this declaration I release the trustees of this scheme from all liability of benefits under this plan with effect from the date retirement benefits are paid. I confirm that when all the assets of the scheme have been disposed in accordance with the Rules, the scheme shall then be deemed to be terminated.

I hereby instruct Irish Life Assurance plc (Irish Life) that retirement benefits should be paid from my PRSA AVC and / or Personal Retirement Bond, if applicable, in the way selected on this form.

I understand that by completing this declaration I release Irish Life from all liability of benefits under this plan(s) with effect from the date retirement benefits are paid.

I understand that, where the annuity option is chosen, the declared annuity rate could change if all required claim documentation is not received within 14 days of the annuity quotation date.

I understand that Irish Life Assurance plc (Irish Life) is required to obtain information from or share information with any Insurance Company or Qualifying Fund Manager, Pension Scheme Administrator or Trustee shown above for the purpose of completing my claim.

I understand Irish Life is required to deduct tax from any payments to me (other than any tax-free lump sum) and this tax will be deducted at the higher rate unless Irish Life receives a Certificate of Tax Credits. I also understand that the maximum tax free lump sum I can take is €200,000 from all pensions since 7th December 2005. Where my pension lump sum exceeds this limit I understand Irish Life is required to deduct standard rate income tax on the excess between €200,000 and €500,000.

I declare that all the answers to all the questions in this retirement claim form are in every respect true and correct. I declare to the best of my knowledge and belief that the information provided in Section 4 of this application form in accordance with Section 787R(4) of the Taxes Consolidation Act 1997 is correct.



Signed

X

(signature of member)

Date



All figures and options are correct as of July 2018 and may change.

<sup>\*</sup> If ITS or DTS act as trustee then they must give their agreement before we can pay retirement benefits. Irish Life will arrange this by contacting the trustee on your behalf to let them know of your request.